

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			11-25-00
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b> <i>(DA)</i>			12-18-00

## INDEX OF CLAIMS

✓ ..... Rejected ..... N ..... Non-elected  
 = ..... Allowed ..... I ..... Interference  
 - (Through numeral) ..... Canceled ..... A ..... Appeal  
 ÷ ..... Restricted ..... O ..... Objected

Claim	Date
Final	
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1	9/16/00
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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